FILED

10/10/2007

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

AUG 2 9 2008

MICHAEL W. DOBBINS
IN FORMA PAUPERIS APPLICATIONISTRICT COURT **AND** FINANCIAL AFFIDAVIT

he	YI N Plair	Riley		FINANC	IAL AFFIDAVI	1
	v.					
		10 10 11 11		CASE NUMBE	R 08 C 50169	
<u>eith</u>	Nygr Dei	rendent(s) Sedlock L.	June 1	JUDGE Phi	Inp G. Ret	nhard
more in provided in the provid	informati de the add CVI r out full p re that I	s included, please place an X into which ion than the space that is provided, attained information. Please PRINT: in the above-entitled in repayment of fees, or in support am unable to pay the costs of these pretition/motion/appeal. In suppo	ch one or _, declar case. Th of my me e procee	more pages that r re that I am the is affidavit const otion for appoin dings, and that I	Mplaintiff □petition Mplaintiff □petition itutes my application tment of counsel, or the am entitled to the re	on number and ner □movant □ to proceed both. I also lief sought in
		estions under penalty of perjury:		- F	,	
1.	I.D. #	you currently incarcerated? #_34982 Name ou receive any payment from the in		□No n or jail: ? □Yes ☑No	(If "No," go to Que	stion 2)
	Are y Mont	ou currently employed? hly salary or wages: and address of employer:	□Yes	M No	_	
	a.	If the answer is "No": Date of last employment: Monthly salary or wages: Name and address of last employ	arch 2.50 yer:	2007 Snap-on	/ crystal la	he, IL
	b.	Are you married? Spouse's monthly salary or wage Name and address of employer:	□Yes	∑ No		
	or any	from your income stated above in region else living at the same reside as? Mark an X in either "Yes" or "I	nce rece	eived more than	\$200 from any of the	ne following
	a.	Salary or wages	aived by		□Yes	⊠No

	b. ☐ Business, ☐ profession or ☐ other self-employment Amount Received by	□Yes	⊠No
	c. ☐ Rent payments, ☐ interest or ☐ dividends Amount Received by	□Yes	⊠No.
	d. ☐ Pensions, ☐ social security, ☐ annuities, ☐ life insurant compensation, ☐ unemployment, ☐ welfare, ☐ alimony or n	nce, ☐ disability naintenance or ☐ ☐Yes	, □ workers child suppor
	AmountReceived by		
	e. Gifts or inheritances Amount Received by	□Yes	₩Ño
	f. Any other sources (state source: Amount Received by) □Yes	₽No
4.	Do you or anyone else living at the same residence have more that savings accounts? ☐Yes ☐No Tota In whose name held: Relationship to you	l amount:	_
5.	Do you or anyone else living at the same residence own any stoc financial instruments? Property: In whose name held: Relationship to you	□Yes	Mo
6.	Do you or anyone else living at the same residence own any rea condominiums, cooperatives, two-flats, three-flats, etc.)? Address of property: Type of property: In whose name held: Amount of monthly mortgage or loan payments: Name of person making payments:	□Yes	MÑo
7.	Do you or anyone else living at the same residence own any automore homes or other items of personal property with a current market value. Property:	obiles, boats, trai ne of more than \$ □Yes	lers, mobile
	Current value:		
	In whose name held: Relationship to you	:	
8.	List the persons who are dependent on you for support, state your relindicate how much you contribute monthly to their support. If none,	ationship to each	person and

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: 8-26-08

Signature of Applicant

Hevin Riley
(Print Name)

NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE

(Incarcerated applicants only) (To be completed by the institution of incarceration)

I certify that the applicant named herein, K \$-4.79107.80 Sm \$-4.79107 on account to his/her cr	evin M. Riley, I.D.# 34982, has the sum redit at (name of institution) MCHenry County Sui	ı of
I further certify that the applicant has the f	following securities to his/her credit: I furth	her
certify that during the past six months the	applicant's average monthly deposit was \$	
(Add all deposits from all sources and the	n <u>divide</u> by number of months).	
8.27.2008	Ge. SMcTan).	
DATE	SIGNATURE OF AUTHORIZED OFFICER	
	Oc. S. McFarlin	
	(Print name)	

rev. 10/10/2007

103.30

Time :12:50

From: 07/07/2007 To: 08/25/2008

Outstanding Debt

Comment	Trx Date	Time	Batch /Inv #		Trx Type		Deposit Withdrawal	Balance Forward
ID 34982	Name RILEY, 1	KEVIN I	M	Block	24 :	145L	Previous Balance	0.00
Imported Entry	07/07/2007	01:05	B#20318	68058	D		0.00	0.00
INTAKE	07/07/2007	01:27	B#21623	68070	D		5.80	5.80
INTAKE	07/07/2007	01:41	B#21624	68072	D		0.31	6.11
Sales Transaction	07/11/2007	08:15	I#9468		I	6.10		0.01
ICSDep. KIOSK USER	07/15/2007	13:51	B#22195	69926	D		15.00	15.01
M/O 200287337899 FRO	07/17/2007	03:52	B#22336	70384	D		40.00	55.01
Sales Transaction	07/17/2007	08:55	I#9519		I	14.90		40.11
Sales Transaction	07/24/2007	08:11	I#9805		1	25.45		14.66
ICSDep. KIOSK USER	07/29/2007	12:41	B#23414	75028	D		20.00	34.66
Sales Transaction	07/31/2007	08:28	I#9885		I	33.75		0.91
ICSDep. JEAN A RILEY	08/05/2007	13:28	B#23889	76556	D		50.00	50.91
Sales Transaction	08/07/2007	08:18	I#10151		I	22.90		28.01
Sales Transaction	08/14/2007	08:55	I#10436		I	27.15		0.86
Indigent	08/20/2007	02:54	B#24951	80049	W		-0.86	0.00
		Depos	its 7	For\$	131	.11		
	,	Withdra	ws 1	For\$	-0	.86		
		Invoi	ees 6	For\$	130	.25		

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McHenry County Sheriff

Debt Statement As Of 08/25/2008 **Only Outstanding**

Inmate ID:

34982

Name:

RILEY, KEVIN MARTIN

Block:

24 145L

KEVIN RILEY

Amount Due: 103.30

	Last				Debt Amount	Paid Amount	Outstanding Balance
Debt Date Code	Payment	Description			9.00	0.00	9.00
11/25/07 HAIR		Haircuts			9.00	0.00	9.00
01/27/08 HAIR		Haircuts			9.00	0.00	9.00
04/20/08 HAIR		Haircuts			9.00	0.00	9.00
07/20/08 HAIR		Haircuts			9.00	0.00	9.00
08/24/08 HAIR		Haircuts		Subtotal —	45.00	0.00	45.00
				Subtotat		0.86	0.89
08/20/07 IND	08/20/07	Indigent			1.75	0.00	1.75
08/20/07 IND	00,20,0	Indigent			1.75	0.00	1.75
		Indigent			1.75	0.00	1.75
09/03/07 IND		Indigent			1.75	0.00	1.75
09/10/07 IND		Indigent			1.75		1.75
09/17/07 IND		Indigent			1.75	0.00	1.75
09/24/07 IND		Indigent			1.75	0.00	1.75
10/01/07 IND		Indigent			1.75	0.00	1.75
10/08/07 IND		Indigent			1.75	0.00	1.75
10/15/07 IND		Indigent			1.51	0.00	1.75
11/12/07 IND		Indigent			1,75	0.00	1.66
11/19/07 IND		Indigent			1.66	0.00	1.75
11/26/07 IND		Indigent			1.75	0.00	1.75
12/03/07 IND		Indigent			1.75	0.00	1.66
12/10/07 IND		Indigent			1.66	0.00	
12/17/07 IND					1.75	0.00	1.75
12/24/07 IND		Indigent			1.75	0.00	1.75
12/31/07 IND		Indigent			1.75	0.00	1.75
01/07/08 IND		Indigent			1.66	0.00	1.66
01/14/08 IND		Indigent			1.66	0.00	1.66
01/20/08 IND		Indigent			1.66	0.00	1.66
01/28/08 IND		Indigent			1.66	0.00	1.66
02/03/08 IND		Indigent			1.66	0.00	1.66
02/11/08 IND		Indigent			1.66	0.00	1.66
02/18/08 IND		Indigent			1.51	0.00	1.51
05/26/08 IND		Indigent			1.51	0.00	1.51
06/01/08 IND		Indigent	•		1.51	0.00	1.51
06/09/08 IND		Indigent			1.51	0.00	
06/16/08 IND		Indigent			1.51	0.00	
06/29/08 IND		Indigent			1.51	0.00	
07/07/08 IND		Indigent			1.51	0.00	1.51
07/14/08 IND		Indigent		<u></u>			
						Page :	_ 1

Inmate ID: 34982 Case No.06-8-V-5016 SEVI DOCUMENTO FREE SO120520 080 (1825/2008) 7

Debt Date Code	Last Payment	Description		Debt Amount	Paid Amount	Outstanding Balance
07/28/08 INI		Indigent		1.51	0.00	1.51
08/04/08 IND		Indigent		1.51	0.00	1.51
08/11/08 IND		Indigent		1.51	0.00	1.51
08/18/08 IND		Indigent		1.51	0.00	1.51
08/25/08 IND		Indigent		1.51	0.00	1.51
			Subtotal	59.16	0.86	58.30
			Total	104.16	0.86	103.30

0 - 30	31 - 60	61 - 90	Over 90	Total
16.55	13.53	4.53	68.69	103.30

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